Hospital Profile:

BAYSTATE FRANKLIN MEDICAL CENTER

Baystate Franklin Medical Center (Baystate Franklin) is a non-profit, acute care community hospital. It is a mid-size hospital in Massachusetts, with 110 staffed beds. Baystate Franklin is located in the Pioneer Valley/Franklin region and represents 6% of all acute hospital staffed beds in the region. It is a member of the Baystate Health system. Baystate Franklin qualifies as a Disproportionate Share Hospital (DSH), as more than 63% of its gross patient service revenue is derived from government programs.

PATIENTS Forty-seven percent of all inpatient cases treated at Baystate Franklin are from Greenfield and Turners Falls.

INPATIENT SERVICES Compared with the other community-DSH hospitals, Baystate Franklin treats a greater proportion of mid and lower-severity cases. In FY12, it accounted for 5% of all inpatient discharges from acute hospitals within the Pioneer Valley/Franklin region. Of note, based on its most common FY12 inpatient cases (DRGs), Baystate Franklin treated 25% of all Adjustment Disorders & Neuroses Except Depressive Diagnoses cases in the Pioneer Valley/Franklin region.

FINANCIAL PERFORMANCE Baystate Franklin's total revenue in FY12 was \$82 million. Its FY12 public payer mix was 68%, equal to the average community-DSH hospital. Baystate Franklin's FY12 inpatient cost[‡] per case mix adjusted discharge was \$9,729, approximately 3% higher than the average community-DSH hospital. Baystate Franklin's CY12 average commercial payer price level was at the 58th percentile, higher than the average community-DSH hospital. It earned a surplus of \$757,000 (0.9% total margin) in FY12, but posted a loss for three of the five years between FY08 and FY12.

AT A GLANCE

TOTAL STAFFED BEDS: 110, mid-size acute hospital

% OCCUPANCY: 49%, < cohort avg. (61%)

TOTAL REVENUE in FY12: \$82 million

PUBLIC PAYER MIX: 68% (DSH* Hospital)

SPECIAL PUBLIC FUNDING: CHART^

TAX STATUS: Non-profit

TRAUMA CENTER DESIGNATION: Not Applicable

CY12 COMMERICIAL PAYER PRICE LEVEL: 58th Percentile

CASE MIX INDEX in FY12: 0.80, < cohort avg. (0.89); < statewide (1.06)

INPATIENT: OUTPATIENT REVENUE in FY12: 30%:70%

TOTAL MARGIN in FY12: 0.9% (\$0.8 million)

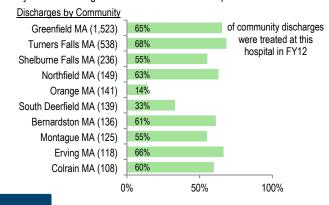
CHANGE in OWNERSHIP (FY08-FY12): Not Applicable

SERVICES

What were the most common inpatient cases (DRGs) treated at the hospital? What proportion of the region's cases did this hospital treat for each service?

Discharges by DRG 7% of regional discharges were treated at Delivery DRGs^{\$\phi\$} (905) this hospital in FY12 11% Maj Dep& Oth/Unsp Psychoses (209) Other Pneumonia (173) 9% Adj Dis/Neur exc Dep (159) 25% Heart Failure (147) 6% Bipolar Disorders (122) 8% COPD (117) Cellulitis, Oth Bact Skn Inf (101) Schizophrenia (98) 10% Sepsis & Dissem Inf (94) 6% 0% 20% 40% 60% 80% 100%

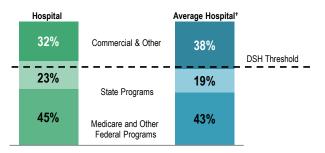
Where did most of the hospital's inpatients reside? What proportion of each community's total discharges were attributed to this hospital?



PAYER MIX

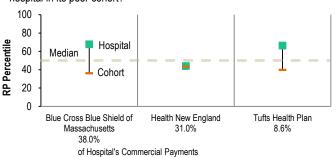
What was the hospital's overall payer mix (gross charges) in FY12, and how does this hospital compare to the average acute hospital's payer mix?

- - Hospital (4,370) = 5% of total regional discharges



Percentage calculations may not sum to 100% due to rounding

What were the hospital's CY12 payer-specific relative price levels for its top three commercial payers? How does this hospital compare to the average hospital in its peer cohort?



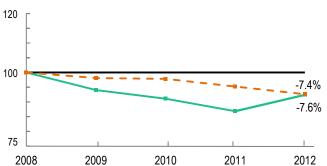
For descriptions of the metrics, please see Technical Appendix.

Cohort: Community, Disproportionate Share

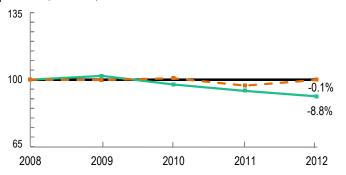
UTILIZATION TRENDS

Hospital Peer Cohort

How has the volume of the hospital's inpatient discharges changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

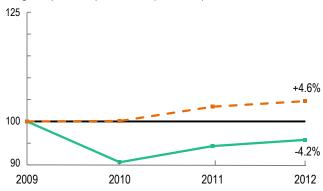


How has the volume of the hospital's outpatient visits changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

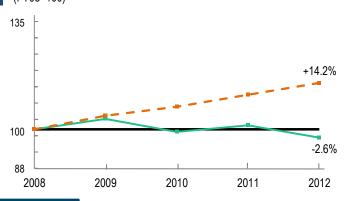


COST TRENDS

How has the hospital's inpatient cost[‡] per case mix adjusted discharge changed compared to FY09, and how does this hospital compare to the average hospital in its peer cohort? (FY09=100)



How have the hospital's total outpatient costs changed compared to FY08, and how does this hospital compare to the average hospital in its peer cohort? (FY08=100)

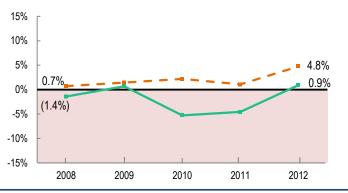


FINANCIAL PERFORMANCE

How have the hospital's total revenue and costs changed between FY08 and FY12?

Revenue, Cost & Profit/Loss (in millions)					
FY	Total Revenue	% Change	Total Cost	% Change	Total Profit/Loss
2008	\$82		\$83		(\$1.2)
2009	\$85	2.9%	\$84	0.8%	\$0.6
2010	\$77	(8.6%)	\$81	(3.1%)	(\$4.1)
2011	\$77	(0.6%)	\$80	(1.3%)	(\$3.5)
2012	\$82	6.9%	\$81	1.3%	\$0.8

What was the hospital's total margin between FY08 and FY12, and how does this compare to the median of its peer cohort hospitals?



For descriptions of the metrics, please see Technical Appendix.

- [‡] Costs were adjusted to exclude direct medical education costs and physician compensation.
- * Disproportionate Share Hospitals (DSH) receive a minimum of 63% of gross pat ient service revenue from public payers.
- ^ For more information on Community Hospital Acceleration, Revitalization and Transformation (CHART) special funding, please contact the Health Policy Commission (HPC).
- * Delivery DRG includes Cesarean and Vaginal Deliveries, and Neonate DRG.

For more information, please contact:

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[†] Average Hospital does not include Specialty hospitals.